JDS Creative Academy

28069 Diaz Road Suite D Temecula, CA 92590

SCHOLARSHIP APPLICATION:

First Name: _____ Last Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ Email: _____

Date of Birth: _____

PARENT OR GUARDIAN INFORMATION:

If under 18, please provide parent or guardian information:

Mother:_____ Father: _____

Phone Number:_____ Email:_____

Employer:_____

The scholarship will be used for what class? _____

What is your level of experience? Beginner: _____ Intermediate: _____ Advanced: _____

If necessary will you be able to provide income verification: Yes: _____ No: _____

Please explain why you would be a good candidate for a scholarship? _____